public health delivery system fully functional and accountable to the community. The Mission has been launched throughout the country with special focus on 18 States with weak health indicators and health infrastructure. The main aim is to provide accessible, affordable, accountable and effective healthcare especially to the rural population and the vulnerable groups. The strategy is to *inter-alia*.

* Promote access of improve healthcare at household level through the Accredited Social Health Activist (ASHA).
* Involve the community in the planning, implementation and monitoring of programmes.
* Train and enhance capacity of Panchayati Raj Institutions to own, control and manage public health services.
* Integrate vertical health and family welfare programmes at National, State and District levels.
* Promote convergence of health programmes with nutrition, sanitation and drinking water.
* Extend technical support to National, State and District Health Mission for public health management.
* Promote partnership with non-government stakeholders.

To correct the regional balance in the availability of affordable/reliable tertiary healthcare services and also augment facilities for quality medical education, the Government has launched the Pradhan Mantri Swasthya Suraksha Yojana in July, 2003. Under this scheme, it is proposed to establish 6 new AIIMS like institutions and upgrade 13 medical college institutions to the level of AIIMS.

The National Rural Health Mission is for a 7 year period from 2005-2012 and the allocation under the Mission for the remaining period and for programmes in the health sector will fall within the formulation of the 11th Five Year Plan which is yet to be finalized.

Health warning on beedi packets

1889. SHRI SUDARSHAN AKARAPU: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether his Ministry has recently issued a Government order regarding

beedi manufacturing units to mandatorily print the "statutory warning" on beedi packs that "smoking is injurious to health";

(b) if so, the details thereof;

(c) what is the specification, size etc. of the "statutory warning" that is to be printed on beedi packs; and

(d) whether it is a fact that several beedi manufacturing companies have closed down their units in the country particularly in Andhra Pradesh in protest against the above order and as a result several beedi workers have been rendered jobless?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (d) The Government has notified 'the Cigarettes and otherTobacco Products (Packaging and Labelling) Rules, 2006' on 5th July 2006 under the provisions of the Cigarettes and Tobacco Products (Prohibition of Advertisement and Regulation of Trade & Commerce, Production, Supply and Distribution) Act, 2003 which is applicable to all tobacco products including beedi.

The components of the Rules specify the manner in which the skull and bones sign, the health warning, pictorial representation of ill effects of tobacco use and the health message, would be printed on the tobacco product packets.

Considering the provisions of the Act that the health warning should be conspicuous and prominent the minimum size prescribed is 3.5 cm X 4.0 cm which also covers 50% of the principal display area of the tobacco pack. These Rules are to be effective only from 1st February, 2007.

There is no report on closure of beedi manufacturing units.

Polio eradication measures

1890. SHRIMATI PREMA CARIAPPA:
SHRIMATI SHOBHANA BHARTIA:
DR. NARAYAN SINGH MANAKLAO:
SHRI MAHENDRA SAHNI:
SHRIMATI MAYA SINGH:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state: